UNITED STATES DISTRICT COURT

for the Southern 2021 July

9 PM 2:53

District of New York

Division

Nashim Luke

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

C.O. Khalid

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

Case No.

(to be filled in by the Clerk's Office)

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

I. The Parties to This Complaint

Α.	The	Plain	tiff(s)	

В.

Provide the information below for	r each plaintiff named in the complaint. Attach additional pages if
needed.	remon promise in the complexity. Fittach additional pages if
Name	Nashim Luke
All other names by which	
you have been known:	
ID Number	241-200-1108
Current Institution	Nic
Address	1500 hazen st
	east elmhurst NY 11370
	Citv State Zip Code
The Defendant(s)	
listed below are identical to those the person's job or title (if known) as individual capacity or official capa	an organization, or a corporation. Make sure that the defendant(s) contained in the above caption. For an individual defendant, include nd check whether you are bringing this complaint against them in their acity, or both. Attach additional pages if needed.
Defendant No. 1	
Name	Khalid
Job or Title (if known)	C.O.
Shield Number	19872
Employer	NYC DOC
Address	1500 hazen st
	east eimhurst NY 11370
	Citv State Zip Code
	☐ Individual capacity ☐ Official capacity
Defendant No. 2	
Name	
Job or Title (if known)	
Shield Number	
Employer	
Address	
	City State Zip Code
	☐ Individual capacity ☐ Official capacity

Na	me			
Jot	o or Title (if known)	,		
Sh	ield Number	**************************************		
En	ployer			
Ad	dress			
		City	State	Zip Code
		☐ Individual capacity	Official capacit	y
Defenda	ant No. 4			
Nai	ne			
Job	or Title (if known)			
	eld Number		· · · · · · · · · · · · · · · · · · ·	
	ployer			
Ado	iress			
		,		
Basis for Jurisd		City ☐ Individual capacity	State Official capacity	
Under 42 U.S.C. immunities secur Federal Bureau o	§ 1983, you may sue stared by the Constitution are of Narcotics, 403 U.S. 38		Official capacity	, privileges, o
Under 42 U.S.C.	§ 1983, you may sue stared by the Constitution are of Narcotics, 403 U.S. 38	☐ Individual capacity Integrate or local officials for the "de not [federal laws]." Under Bive	Official capacity	, privileges, o
Under 42 U.S.C. immunities secur Federal Bureau constitutional rig	§ 1983, you may sue stared by the Constitution are of Narcotics, 403 U.S. 38	Individual capacity Individual capacity ate or local officials for the "dend [federal laws]." Under <i>Bive</i> 88 (1971), you may sue federal	Official capacity	, privileges, o
Under 42 U.S.C. immunities secur Federal Bureau of constitutional rig	§ 1983, you may sue stated by the Constitution at of Narcotics, 403 U.S. 38 hts. bringing suit against (chemostrum)	Individual capacity ate or local officials for the "dend [federal laws]." Under Bive 88 (1971), you may sue federal ack all that apply):	Official capacity	, privileges, o
Under 42 U.S.C. immunities secur Federal Bureau of constitutional rig A. Are you Fede	§ 1983, you may sue stated by the Constitution at of Narcotics, 403 U.S. 38 hts.	Individual capacity Individual capacity ate or local officials for the "dend [federal laws]." Under Bive 88 (1971), you may sue federal ack all that apply):	Official capacity	, privileges, o
Under 42 U.S.C. immunities secur Federal Bureau of constitutional rig A. Are you Fede State B. Section 1 the Const	§ 1983, you may sue stated by the Constitution are of Narcotics, 403 U.S. 38 hts. bringing suit against (cheeral officials (a Bivens cleeral officials (a § 1983 allows claims alleging itution and [federal laws]	Individual capacity ate or local officials for the "de nd [federal laws]." Under Bive 88 (1971), you may sue federal eck all that apply): laim) 983 claim) ing the "deprivation of any rights." 42 U.S.C. 8 1983. If you a	Official capacity privation of any rights ens v. Six Unknown Na officials for the violate officials for the violate atts, privileges, or immunity, privileges, privileges, or immunity, privileges, privi	, privileges, omed Agents of ion of certain
Under 42 U.S.C. immunities secur Federal Bureau of constitutional rig A. Are you Fede State B. Section 1 the Const	§ 1983, you may sue stated by the Constitution are of Narcotics, 403 U.S. 38 hts. bringing suit against (cheeral officials (a Bivens cleeral officials (a § 1983 allows claims alleging itution and [federal laws]	Individual capacity atte or local officials for the "de nd [federal laws]." Under Bive 188 (1971), you may sue federal eck all that apply): laim) 983 claim)	Official capacity privation of any rights ens v. Six Unknown Na officials for the violate officials for the violate atts, privileges, or immunity, privileges, privileges, or immunity, privileges, privi	privileges, on med Agents of ion of certain

· .		statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under Bivens, explain how each defendant acted under color of
		federal law. Attach additional pages if needed.
		N/A
ш.	Priso	ner Status
Ē	Indica	tte whether you are a prisoner or other confined person as follows (check all that apply):
	Ø	Pretrial detainee
-		Civilly committed detainee
••,		Immigration detainee
• • •		Convicted and sentenced state prisoner
	П	Convicted and sentenced federal prisoner
• •		Other (explain)
v.	Statem	ent of Claim
	State as	briefly as possible the facts of your case. Describe how each defendant was personally involved in the wrongful action, along with the dates and locations of all relevant events. You may wish to include
	further any cas	details such as the names of other persons involved in the events giving rise to your claims. Do not cite es or statutes. If more than one claim is asserted, number each claim and write a short and plain nt of each claim in a separate paragraph. Attach additional pages if needed.
	further any cas	details such as the names of other persons involved in the events giving rise to your claims. Do not cite as or statutes. If more than one claim is asserted, number each claim and write a short and plain
	further any cas stateme	details such as the names of other persons involved in the events giving rise to your claims. Do not cite es or statutes. If more than one claim is asserted, number each claim and write a short and plain not of each claim in a separate paragraph. Attach additional pages if needed.
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v	
V.	
	Facts
	.5/31/
1.	on #121/2 At approx 11:10 am to the plaintiff walked towards the cup stat
	which was located in side of his cage area to retrieve a bottle of
	Water From the DeFendant.
	Upon retreiving the bottle of water From the Defendant, the
	Defendant purpously plucked the plaintiff in his eye socket
	causing the plaintiff Pain and lost of sight in his left eye.
	The Defendant then verbally stated to the plaintiff that he did
: .	not like him, and to Go Fuck him Self."
4.	The plaintiff, then covered his eyes with his palm as he retreated
	to his cell area to avoid Further confrontation with the
	Defendant.
5.	plaintiff cell mate notified the proper channels to request
	a medical emergency For the plaintiff
6.	over a hour later at a prox 12:42 the plaintiff was
	escorted to the clinic to report induries and recieve
-	medical attention.
······································	

Washington .	Cause For action
	1- The actions OF Defendant OFFicer Khalib in using Physical
	Force against a plaintiff without need or provocation, were some
	maliciausly and Sadjstically and constituted a violation of
	the united states constitution
	RelieF Requested
No.	WHEREFORE, plaintiff request that the court grant the
	Following relief.
	A. Issue a declaratory Judgment stating that:
entet 	2. The phyisical abuse of the plaintiff by the Defendant violated
	the plaintiff rights under the consitution of the united states
	B. Award Compensatory damages in the Following amounts
DESCRIPTION OF THE PROPERTY OF	3.2 million dollars Jointly and Severally against defendant
	Khalid For the physical and emotional injuries sustained as
	a result of the plaintiff being struck in the eye
	C. Award punitive Damages in the Following amounts
	4 30,000 against Defendant Khalid
	D. Grant such other relief as it may appear that plaintiff
-931415-l	is entitled
· · · · · · · · · · · · · · · · · · ·	6/1/21
	Respectfully submited
·	Nashin Luke
**************************************	Mate
·	
	11 8

C.	What date and	approximate tim	e did the events giving rise t	to your claim(s) occur
		,		(D) OF OUR

Jana Jana	A	- A-7	 1.10	·
	A. I	LUL	 il Hu	2 Lai

D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)

see attached Document

V. Injuries.

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

Pain, Swelling in sight eyen Loss of sight.

VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

See attacked Document

VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

Yes	• • •						
□ No							
If yes, name th	e jail, prison, o	r other corre	ctional facil	ity where yo	u were cor	ifined at the	e time of the
events giving r	ise to your clai	m(s).					
			•	· · · · · · · · · · · · · · · · · · ·		•	
	:	•					
Does the jail, p	rison, or other	correctional	facility whe	re your clain	n(s) arose l	nave a griev	vance
Yes							
□ No							
	ow						
☐ Do not kno							:
Does the grieva	nce procedure	at the jail, pr	rison, or oth	er correction	al facility	where your	claim(s) aros
Does the grieva	nce procedure	at the jail, p ns?	rison, or oth	er correction	al facility	where your	claim(s) aros
Does the grieva cover some or a	nce procedure	at the jail, p	rison, or oth	er correction	al facility	where your	claim(s) aros
Does the grieva cover some or a	nce procedure all of your clair	at the jail, p	rison, or oth	er correction	al facility	where your	claim(s) aros

D.	Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?
•	Yes
,	□ No
	If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?
* :	☐ Yes
	□ No.
E.	If you did file a grievance:
	1. Where did you file the grievance?
	- NA
	2. What did you claim in your grievance?
}	N/A
	3. What was the result, if any?
	NA
	4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)
	N/A

	F.	If you did not file a grievance:
		1. If there are any reasons why you did not file a grievance, state them here:
		2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:
•	G.	Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.
		(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)
VIII.	Previous	Lawsuits
	brought maliciou	ee strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying give if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, s, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent f serious physical injury." 28 U.S.C. § 1915(g).
	To the b	est of your knowledge, have you had a case dismissed based on this "three strikes rule"?
	☐ Yes	
	Ŋ\No	
	If yes, sta	te which court dismissed your case, when this occurred, and attach a copy of the order if possible.

	. [☐ Yes
•	Ţ	No
	v If	your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If ther
	m	ore than one lawsuit, describe the additional lawsuits on another page, using the same format.)
,	1.	Parties to the previous lawsuit
		Plaintiff(s)
	-	Defendant(s)
2	2.	Court (if federal court, name the district; if state court, name the county and State)
-		to the state of th
	•	
3	3.	Docket or index number
	•	
	1	Name of Judge assigned to your case
. 7	۲.	rame of Judge assigned to your case
, 5		Approximate date of filing lawsuit
	٠.	
6	•	Is the case still pending?
-	,	☐ Yes
		□No
• •		If no, give the approximate date of disposition.
7.		What was the result of the case? (For example: Was the case dismissed? Was judgment entered
,.	•	in your favor? Was the case appealed?)

Pro Se 14 (Rev. 12/16) Complaint for Violation of Civil Rights (Prisoner)

IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

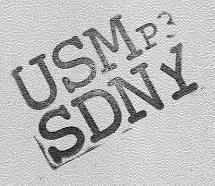
	Date of signing: $6/1$	121		
	Signature of Plaintiff	Ny lee		
•	Printed Name of Plaintiff	Nashim Luke		***************************************
	Prison Identification #	241-200-1108		
· .	Prison Address	1500 hazen st		
,		east elmhurst	_N,	11370
,		City	State	Zip Code
В.	For Attorneys			
	Date of signing:			
	Signature of Attorney			
	Printed Name of Attorney			
	Bar Number			
	Name of Law Firm			
	Address			
: '		The state of the s		
		City	State	Zip Code
	Telephone Number		·	
	E-mail Address			
		- · · · · · · · · · · · · · · · · · · ·		

NAJhim LUKE
BIC: 241-200-1108
NIC
1500 hazen street
Gast elmhunst, Ny 11370









SDNY PRO SECTIONS PRO SECTION 11 PRO SECTION 1 PRO SECTION

Pro Se office
United states District Court
South
New York Southern District
500 Pearl Street
New York, NY 10007